

**FEC
FORM 3**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** ▼ Example: If typing, type over the lines.

Gloria Bromell Tinubu for Congress

ADDRESS (number and street)

Check if different than previously reported. (ACC)

2. **FEC IDENTIFICATION NUMBER** ▼

CITY ▲ STATE ▲ ZIP CODE ▲

3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

STATE ▼ DISTRICT

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P) General (12G) Runoff (12R)

Convention (12C) Special (12S)

Election on / / in the State of

(c) 30-Day **POST**-Election Report for the:

General (30G) Runoff (30R) Special (30S)

Election on / / in the State of

5. Covering Period / / through / /

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Signature of Treasurer *[Electronically Filed]* Date / /

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only									
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FEC FORM 3
(Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 120

Write or Type Committee Name

Gloria Bromell Tinubu for Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	4

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	70383.99	161956.78
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	70383.99	161956.78
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	73023.16	204431.05
(b) Total Offsets to Operating Expenditures (from Line 14).....	260.24	2109.04
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	72762.92	202322.01
8. Cash on Hand at Close of Reporting Period (from Line 27).....	17553.10	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	367141.66	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Gloria Bromell Tinubu for Congress

Report Covering the Period: From: / / To: / /

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	35150.00	88726.00
(ii) Unitemized.....	15133.99	37944.98
(iii) TOTAL of contributions from individuals ▶	50283.99	126670.98
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	20100.00	35200.00
(d) The Candidate.....	0.00	85.80
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	70383.99	161956.78
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	13300.00	57050.00
(b) All Other Loans.....	0.00	800.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	13300.00	57850.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	260.24	2109.04
15. OTHER RECEIPTS (Dividends, Interest, etc.)	600.00	600.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	84544.23	222515.82

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	73023.16	204431.05
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	6700.00
(b) Of All Other Loans	0.00	800.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	7500.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	650.00	650.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	73673.16	212581.05

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	6682.03
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	84544.23
25. SUBTOTAL (add Line 23 and Line 24).....	91226.26
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	73673.16
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	17553.10

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Gloria Bromell Tinubu for Congress

A. Full Name (Last, First, Middle Initial)
James Adamson md

Mailing Address 7137 Browns Way Shortcut Rd
Shortcut Rd.

City Conway	State SC	Zip Code 29527-6407
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FEC ID number of contributing federal political committee. **C**

Name of Employer Conway Physicians Group	Occupation Physician
---	-------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		12		2014

Transaction ID : VNW1ECGZ883

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
James Adamson md

Mailing Address 7137 Browns Way Shortcut Rd
Shortcut Rd.

City Conway	State SC	Zip Code 29527-6407
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Conway Physicians Group	Occupation Physician
---	-------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		21		2014

Transaction ID : VNW1ECZ6Z12

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Terry Alexander

Mailing Address 1646 Harris Ct

City Florence	State SC	Zip Code 29501-1545
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FEC ID number of contributing federal political committee. **C**

Name of Employer South Carolina Government	Occupation Representative
---	------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		17		2014

Transaction ID : VNW1ECAZ7D9

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1250.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Gloria Bromell Tinubu for Congress

A. Full Name (Last, First, Middle Initial)
Omotayo Alli

Mailing Address 5229 Panola Mill Dr

City Lithonia State GA Zip Code 30038-2355

FEC ID number of contributing federal political committee. **C**

Name of Employer Fulton County Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 18 / 2014

Transaction ID : VNW1ECB15P1

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Omotayo Alli

Mailing Address 5229 Panola Mill Dr

City Lithonia State GA Zip Code 30038-2355

FEC ID number of contributing federal political committee. **C**

Name of Employer Fulton County Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 29 / 2014

Transaction ID : VNW1ED4E6M2

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
Nancy Anderson

Mailing Address 8235 Timber Ridge Rd

City Conway State SC Zip Code 29526-9007

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 13 / 2014

Transaction ID : VNW1ECH7PZ8

Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

600.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Gloria Bromell Tinubu for Congress

Full Name (Last, First, Middle Initial) A. Denise Apple		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 29 / 2014
Mailing Address 9406 Lake Dr		Transaction ID : VNW1ED24SK1
City Myrtle Beach	State SC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Denise Apple	Occupation writer	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) B. Carita S Barr		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 11 / 2014
Mailing Address 3207 Stepp Dr		Transaction ID : VNW1ECYH4H3
City Columbia	State SC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Information Requested	Occupation Information Requested	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) C. Olutoye Bello		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 14 / 2014
Mailing Address 220 L St NE		Transaction ID : VNW1ECANVV3
City Washington	State DC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Bello, Bello & Assc	Occupation Consultant	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

SUBTOTAL of Receipts This Page (optional).....	1250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Gloria Bromell Tinubu for Congress

Full Name (Last, First, Middle Initial) Linda Bianca		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 26 / 2014
Mailing Address 304 Pipers Ln		Transaction ID : VNW1ECDJ149
City Myrtle Beach	State SC	
Zip Code 29575-5843		Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) Akinola Bolarinwa		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 12 / 2014
Mailing Address 3944 Grayridge Dr		Transaction ID : VNW1ECAPJW9
City Duluth	State GA	
Zip Code 30097-7320		Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Self Employed	Occupation Software Engineer	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) Mary Bowman		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 06 / 2014
Mailing Address PO Box 186		Transaction ID : VNW1ECGS8N8
City Timmons ville	State SC	
Zip Code 29161-0186		Amount of Each Receipt this Period 650.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 800.00
Name of Employer Foe Toe Mprints	Occupation Owner	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 800.00	

SUBTOTAL of Receipts This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Gloria Bromell Tinubu for Congress

A. Full Name (Last, First, Middle Initial)
Richard Byrd

Mailing Address 253 Tonawanda Dr SE

City Atlanta State GA Zip Code 30315-8431

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 29 / 2014

Transaction ID : VNW1ED4KCC1

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Charles Campbell

Mailing Address 608 Fox Hollow Rd

City Murrells Inlet State SC Zip Code 29576-7227

FEC ID number of contributing federal political committee. **C**

Name of Employer Dead Dog Saloon Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
650.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 19 / 2014

Transaction ID : VNW1ECHBWZ0

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
David J Canty

Mailing Address 4208 Little River Rd

City Myrtle Beach State SC Zip Code 29577-0868

FEC ID number of contributing federal political committee. **C**

Name of Employer David J. Canty, P.A. Occupation myrtlewood 2- president

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 21 / 2014

Transaction ID : VNW1ECZ6X01

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

800.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Gloria Bromell Tinubu for Congress

Full Name (Last, First, Middle Initial) A. Cathy Connor		Date of Receipt M M / D D / Y Y Y Y 09 / 10 / 2014
Mailing Address 312 4th St SE		Transaction ID : VNW1ECY5MZ4
City Washington	State DC	
Zip Code 20003-2044		Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 450.00
Name of Employer Parson Brinckerhoff	Occupation Senior VP	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	
Election Cycle-to-Date 450.00		

Full Name (Last, First, Middle Initial) B. Traci Cooper		Date of Receipt M M / D D / Y Y Y Y 09 / 19 / 2014
Mailing Address 120 Stonebrook Dr		Transaction ID : VNW1ECZ2ZR2
City Blythewood	State SC	
Zip Code 29016-8719		Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 750.00
Name of Employer Richland School District One	Occupation Educator	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	
Election Cycle-to-Date 750.00		

Full Name (Last, First, Middle Initial) C. Evelyn Drayton		Date of Receipt M M / D D / Y Y Y Y 08 / 31 / 2014
Mailing Address 876 Ford Village Rd		Transaction ID : VNW1ECMMVC6
City Georgetown	State SC	
Zip Code 29440-9177		Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. C		Donation 325.00
Name of Employer N/A	Occupation Retired	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	
Election Cycle-to-Date 325.00		

SUBTOTAL of Receipts This Page (optional).....	900.00
TOTAL This Period (last page this line number only).....	900.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Gloria Bromell Tinubu for Congress

A. Full Name (Last, First, Middle Initial)
Jon W Drysdale

Mailing Address 504 Oxeye Dr

City Woodstock State GA Zip Code 30188-8002

FEC ID number of contributing federal political committee. **C**

Name of Employer Low Engineers Occupation Partner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 29 / 2014

Transaction ID : VNW1ED4KC22

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Clifford Eby

Mailing Address 10825 Alloway Dr

City Potomac State MD Zip Code 20854-1504

FEC ID number of contributing federal political committee. **C**

Name of Employer Parsons Brinckerhoff Occupation Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 24 / 2014

Transaction ID : VNW1ECZJT83

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Valerie Edwards

Mailing Address 558 Centennial Ln NW

City Atlanta State GA Zip Code 30313-2408

FEC ID number of contributing federal political committee. **C**

Name of Employer INTEGRAL GROUP Occupation VP

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 29 / 2014

Transaction ID : VNW1ED4E104

Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 12 OF 120	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Gloria Bromell Tinubu for Congress

A. Full Name (Last, First, Middle Initial)
William Eisenhauer

Mailing Address 354 9th St NE

City Atlanta State GA Zip Code 30309-4209

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 22 / 2014

Transaction ID : VNW1ECZ8P50

Amount of Each Receipt this Period
 100.00

B. Full Name (Last, First, Middle Initial)
William Eisenhauer

Mailing Address 354 9th St NE

City Atlanta State GA Zip Code 30309-4209

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 25 / 2014

Transaction ID : VNW1ECZM9C2

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
Carolyn Ellis

Mailing Address PO Box 2663

City Conway State SC Zip Code 29528-2663

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 21 / 2014

Transaction ID : VNW1ECZ6YA1

Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

600.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Gloria Bromell Tinubu for Congress

A. Full Name (Last, First, Middle Initial)
Austin O. Esogbue

Mailing Address 1510 Loch Lomond Trl SW

City Atlanta State GA Zip Code 30331-7428

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Professor of Engineering

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 29 / 2014

Transaction ID : VNW1ED4E4S8

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Kayode Fasae

Mailing Address 4914 Chimney Oaks Dr SE

City Mableton State GA Zip Code 30126-5951

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-employed Occupation home health owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 29 / 2014

Transaction ID : VNW1ECMF383

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Samuel H Frink

Mailing Address 311 69th Ave N Apt U30

City Myrtle Beach State SC Zip Code 29572-3602

FEC ID number of contributing federal political committee. **C**

Name of Employer F&J Associates Occupation Partner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **200.00**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 19 / 2014

Transaction ID : VNW1ED4PJJ6

Amount of Each Receipt this Period
200.00

[MEMO ITEM]
*

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

750.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)
 11a 12 11b 13a 11c 13b 11d 14 15
 PAGE 14 OF 120

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NAME OF COMMITTEE (In Full)
Gloria Bromell Tinubu for Congress

A. Full Name (Last, First, Middle Initial)
Samuel H Frink

Mailing Address 311 69th Ave N
 Apt U30

City Myrtle Beach State SC Zip Code 29572-3602

FEC ID number of contributing federal political committee. **C**

Name of Employer F&J Associates Occupation Partner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 21 / 2014

Transaction ID : VNW1ECZ6Z62

Amount of Each Receipt this Period
 100.00

B. Full Name (Last, First, Middle Initial)
Wallace Funderburk Jr.

Mailing Address PO Box 624

City Cheraw State SC Zip Code 29520-0624

FEC ID number of contributing federal political committee. **C**

Name of Employer Wallace Mechanical Supply, Inc. Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 09 / 2014

Transaction ID : VNW1ECXTED3

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
John J Funny

Mailing Address 1908 Saxon Valley Cir NE
 1349 W. Peachtree St. NE Suite 129

City Atlanta State GA Zip Code 30319-6007

FEC ID number of contributing federal political committee. **C**

Name of Employer Grice Consulting Group, LLC Occupation President / CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 2600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 29 / 2014

Transaction ID : VNW1ED4E4P4

Amount of Each Receipt this Period
 2600.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2950.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 15 OF 120	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Gloria Bromell Tinubu for Congress

A. Full Name (Last, First, Middle Initial)
Ray Funnye

Mailing Address 95 Bantu Ln

City State Zip Code
Georgetown SC 29440-6701

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Georgetown County Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 21 / 2014

Transaction ID : VNW1ECZ6YZ6

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Joan Furlong

Mailing Address 527 Mockingbird Ave

City State Zip Code
Myrtle Beach SC 29577-5028

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
retired retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 13 / 2014

Transaction ID : VNW1ECH7QS3

Amount of Each Receipt this Period
150.00

C. Full Name (Last, First, Middle Initial)
Joan Furlong

Mailing Address 527 Mockingbird Ave

City State Zip Code
Myrtle Beach SC 29577-5028

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
retired retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : VNW1ED4PND3

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

500.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Gloria Bromell Tinubu for Congress

A. Full Name (Last, First, Middle Initial)
Norman Gamble

Mailing Address **PO Box 327**

City **Greeleyville** State **SC** Zip Code **29056-0327**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Ebenezer** Occupation **Executive Board Member**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 29 / 2014

Transaction ID : VNW1ED4JNJ0

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Grace Gifford

Mailing Address **2380 Ole King St**

City **Conway** State **SC** Zip Code **29526-5312**

FEC ID number of contributing federal political committee. **C**

Name of Employer **retired** Occupation **speech language pathologist**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
220.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 25 / 2014

Transaction ID : VNW1ECZK858

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Joyce Greene

Mailing Address **4428 Live Oak Dr**

City **Little River** State **SC** Zip Code **29566-9125**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Merck & Co.** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
08 / 11 / 2014

Transaction ID : VNW1ECGV1P6

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

600.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Gloria Bromell Tinubu for Congress

A. Full Name (Last, First, Middle Initial)
Evelyn Guille

Mailing Address 1441 N Cashua Dr

City Florence	State SC	Zip Code 29501-6950
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer retired	Occupation retired
-----------------------------	-----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 20 / 2014

Transaction ID : VNW1ED4NTP5

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
Avarita Hanson

Mailing Address 220 Ellen PI SW

City Atlanta	State GA	Zip Code 30331-7373
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Attorney	Occupation Attorney
------------------------------	------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 20 / 2014

Transaction ID : VNW1ED4JMA4

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Julie Harbin

Mailing Address 6468 Somersby Dr

City Murrells Inlet	State SC	Zip Code 29576-8936
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
240.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 19 / 2014

Transaction ID : VNW1ECZ2RT2

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

575.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Gloria Bromell Tinubu for Congress

A. Full Name (Last, First, Middle Initial)
Leon Harvey

Mailing Address 640 E McIver Rd

City Florence State SC Zip Code 29506-6919

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 03 / 2014

Transaction ID : VNW1ECAQ5R8

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
James D. Henderson

Mailing Address 3719 Indigo Run

City Conway State SC Zip Code 29526-7822

FEC ID number of contributing federal political committee. **C**

Name of Employer Coastal Carolina University Occupation Professor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 13 / 2014

Transaction ID : VNW1ECH7QD8

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
Mary R Heriot

Mailing Address 115 Sandy Ln

City Cayce State SC Zip Code 29033-2749

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 10 / 2014

Transaction ID : VNW1ECAQ7D7

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1250.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Gloria Bromell Tinubu for Congress

A. Full Name (Last, First, Middle Initial)
Mary R Heriot

Mailing Address 115 Sandy Ln

City State Zip Code
Cayce SC 29033-2749

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
N/A Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 19 / 2014

Transaction ID : VNW1ECZ2WZ0

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Gladys Hines

Mailing Address 310 E Pocket Rd

City State Zip Code
Florence SC 29506-8102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 28 / 2014

Transaction ID : VNW1ECME7T6

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Stephen Hoffius

Mailing Address 122 Peachtree St

City State Zip Code
Charleston SC 29403-3357

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self employed editor-in-chief

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 01 / 2014

Transaction ID : VNW1ECE9B8

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

850.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Gloria Bromell Tinubu for Congress

A. Full Name (Last, First, Middle Initial)
Eunice D Holland

Mailing Address 5015 Lakeshore Dr

City Columbia State SC Zip Code 29206

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 11 / 2014

Transaction ID : VNW1ECYH333

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Derrick Humphries

Mailing Address 1428 Juniper St NW

City Washington State DC Zip Code 20012-1416

FEC ID number of contributing federal political committee. **C**

Name of Employer lawyer Occupation DAHPC

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
125.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 14 / 2014

Transaction ID : VNW1ECH2YG7

Amount of Each Receipt this Period
125.00

C. Full Name (Last, First, Middle Initial)
Derrick Humphries

Mailing Address 1428 Juniper St NW

City Washington State DC Zip Code 20012-1416

FEC ID number of contributing federal political committee. **C**

Name of Employer lawyer Occupation DAHPC

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 14 / 2014

Transaction ID : VNW1ECYNSW0

Amount of Each Receipt this Period
125.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

750.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Gloria Bromell Tinubu for Congress

A. Full Name (Last, First, Middle Initial)
Mary M. Jeffcoat

Mailing Address **PO Box 3678**

City **Myrtle Beach** State **SC** Zip Code **29578-3678**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Long Bay Professional Services** Occupation **Consultant**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : VNW1ED2D540

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Kate Jensen

Mailing Address **1134 Links Rd**

City **Myrtle Beach** State **SC** Zip Code **29575-5807**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Cruiseone** Occupation **Cruise Specialist**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
07 / 23 / 2014

Transaction ID : VNW1ECK92D3

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Charles Johnson Sr.

Mailing Address **44 Broad St NW**

City **Atlanta** State **GA** Zip Code **30303-2327**

FEC ID number of contributing federal political committee. **C**

Name of Employer **William, Russell, & Johnson** Occupation **Partner**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 29 / 2014

Transaction ID : VNW1ED4DYK8

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Gloria Bromell Tinubu for Congress

A. Full Name (Last, First, Middle Initial)
Albert L Kemp Jr., Esq.

Mailing Address **PO Box 3144**
1230 Peachtree St. NE

City **Atlanta** State **GA** Zip Code **30302-3144**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Kemp Firm** Occupation **Attorney**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 03 / 2014

Transaction ID : VNW1ECX2FK4

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Kathleen Hill Kent

Mailing Address **300 Todd Ln**
2

City **North Myrtle Beach** State **SC** Zip Code **29582-5162**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Berkshire Hathaway** Occupation **Realtor**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 16 / 2014

Transaction ID : VNW1ECZ1HP7

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Nancy Kreml

Mailing Address **111 Southwood Dr**

City **Columbia** State **SC** Zip Code **29205-3219**

FEC ID number of contributing federal political committee. **C**

Name of Employer **NA** Occupation **retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
275.00

Date of Receipt
 M M / D D / Y Y Y Y
08 / 01 / 2014

Transaction ID : VNW1ECE9H5

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

550.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Gloria Bromell Tinubu for Congress

A. Full Name (Last, First, Middle Initial)
Nancy Kreml

Mailing Address 111 Southwood Dr

City Columbia State SC Zip Code 29205-3219

FEC ID number of contributing federal political committee. **C**

Name of Employer NA Occupation retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : VNW1ED2ERR8

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
Subash Kuchikulla

Mailing Address 400 W Peachtree St NW
Unit 2701

City Atlanta State GA Zip Code 30308-3554

FEC ID number of contributing federal political committee. **C**

Name of Employer Materials Managers & Engineers INC Occupation President/CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 29 / 2014

Transaction ID : VNW1ED4E6Y1

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mary Lehman

Mailing Address 305 Hillsborough Dr

City Conway State SC Zip Code 29526-7996

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Journalist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **200.00**

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 03 / 2014

Transaction ID : VNW1ECAPBK5

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

325.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Gloria Bromell Tinubu for Congress

A. Full Name (Last, First, Middle Initial)
Mary Lehman

Mailing Address 305 Hillsborough Dr

City Conway	State SC	Zip Code 29526-7996
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired	Occupation Journalist
-----------------------------	--------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		03		2014

Transaction ID : VNW1ECEK374

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Mary Lehman

Mailing Address 305 Hillsborough Dr

City Conway	State SC	Zip Code 29526-7996
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired	Occupation Journalist
-----------------------------	--------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		03		2014

Transaction ID : VNW1ECWYN79

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Samson Liao

Mailing Address 12 Turning Mill Rd

City Sharon	State MA	Zip Code 02067-2866
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Parsons Brincker Hoff	Occupation Engineer
---	------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		21		2014

Transaction ID : VNW1ECZ6ZNO

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

300.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Gloria Bromell Tinubu for Congress

A. Full Name (Last, First, Middle Initial)
Meg MacDonald

Mailing Address 5718 Porcher Dr

City	State	Zip Code
Myrtle Beach	SC	29577-2323

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested	Occupation Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 300.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : VNW1ED4PNB7

Amount of Each Receipt this Period
 _____ 300.00

B. Full Name (Last, First, Middle Initial)
Jackie Bessie Mayfield

Mailing Address PO Box 1548

City	State	Zip Code
Orange	TX	77631-1548

FEC ID number of contributing federal political committee. **C**

Name of Employer self	Occupation tax accountant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 18 / 2014

Transaction ID : VNW1ECZ0M70

Amount of Each Receipt this Period
 _____ 100.00

C. Full Name (Last, First, Middle Initial)
Vela McClam Mithchell

Mailing Address 1031 Vinings Falls Dr SE

City	State	Zip Code
Smyrna	GA	30080-3120

FEC ID number of contributing federal political committee. **C**

Name of Employer GI Travel	Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 300.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 29 / 2014

Transaction ID : VNW1ED4E5V7

Amount of Each Receipt this Period
 _____ 300.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

_____ 700.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Gloria Bromell Tinubu for Congress

A. Full Name (Last, First, Middle Initial)
Kenneth McDonald

Mailing Address 4816 Ashby Grv NE

City	State	Zip Code
Roswell	GA	30075-6117

FEC ID number of contributing federal political committee. **C**

Name of Employer self	Occupation consultant
-----------------------	-----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 19 / 2014

Transaction ID : VNW1ECHBT35

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Angela Graham Mclver

Mailing Address PO Box 588

City	State	Zip Code
Conway	SC	29528-0588

FEC ID number of contributing federal political committee. **C**

Name of Employer Mclver & Graham, P.A.	Occupation Attorney
--	---------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
150.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 06 / 2014

Transaction ID : VNW1ECG57W3

Amount of Each Receipt this Period
150.00

C. Full Name (Last, First, Middle Initial)
Angela Graham Mclver

Mailing Address PO Box 588

City	State	Zip Code
Conway	SC	29528-0588

FEC ID number of contributing federal political committee. **C**

Name of Employer Mclver & Graham, P.A.	Occupation Attorney
--	---------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 19 / 2014

Transaction ID : VNW1ED4PJ87

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

750.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Gloria Bromell Tinubu for Congress

A. Full Name (Last, First, Middle Initial)
Honorable Walt McLeod

Mailing Address 308 Pomaria St

City Little Mountain State SC Zip Code 29075-9003

FEC ID number of contributing federal political committee. **C**

Name of Employer South Carolina House of Representative Occupation State Representative

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 28 / 2014

Transaction ID : VNW1ECWV0C3

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
Linda Miranda

Mailing Address 4135 Brooks Mill Dr

City Lithonia State GA Zip Code 30038-4144

FEC ID number of contributing federal political committee. **C**

Name of Employer Williams-Russell and Johnson, Inc. Occupation CFO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 25 / 2014

Transaction ID : VNW1ECZMV21

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Morant & Morant LLC

Mailing Address 1022 Prince St

City Georgetown State SC Zip Code 29440-3552

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 17 / 2014

Transaction ID : VNW1ED4PJB0

Amount of Each Receipt this Period
250.00

PARTNERSHIP--partners below if itemized

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

800.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 28 OF 120	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Gloria Bromell Tinubu for Congress

A. Full Name (Last, First, Middle Initial)
Marthena Morant

Mailing Address 1539 Dr.

City Georgetown	State SC	Zip Code 29440
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired	Occupation Educator
-----------------------------	------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 02 / 2014

Transaction ID : VNW1ECWWRC2

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Joseph Moyer

Mailing Address 1556 Brookgreen Dr

City Myrtle Beach	State SC	Zip Code 29577-5870
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AASC	Occupation Physician
--------------------------	-------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
6200.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 21 / 2014

Transaction ID : VNW1ECZ9YS3

Amount of Each Receipt this Period
2600.00

C. Full Name (Last, First, Middle Initial)
Phil P. Noble

Mailing Address 32 Bull St
207 East Bay St

City Charleston	State SC	Zip Code 29401-1301
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Sc New Democrats	Occupation President
--------------------------------------	-------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 10 / 2014

Transaction ID : VNW1ECY5MW0

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3300.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Gloria Bromell Tinubu for Congress

Full Name (Last, First, Middle Initial) A. Reginald Norton		Date of Receipt M M / D D / Y Y Y Y 09 / 29 / 2014
Mailing Address 480 Darrow Dr		Transaction ID : VNW1ED4KBD8
City State Zip Code Duluth GA 30097-2430	Amount of Each Receipt this Period _____ 500.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period _____ 500.00
Name of Employer Information Requested Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Information Requested Election Cycle-to-Date _____ 500.00	

Full Name (Last, First, Middle Initial) B. Alani Ogunlade		Date of Receipt M M / D D / Y Y Y Y 08 / 13 / 2014
Mailing Address 5475 Campbellton Rd SW		Transaction ID : VNW1ECWV009
City State Zip Code Atlanta GA 30331-7715	Amount of Each Receipt this Period _____ 250.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period _____ 250.00
Name of Employer Information Requested Retired Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Information Requested State Farm Ins Agent Election Cycle-to-Date _____ 250.00	

Full Name (Last, First, Middle Initial) C. Beverley Ojo		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 1824 Mountain Shadow		Transaction ID : VNW1ED4KB21
City State Zip Code Stone Mountain GA 30087-2114	Amount of Each Receipt this Period _____ 500.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period _____ 500.00
Name of Employer Information Requested Rem-Kiks Group Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Information Requested CEO Election Cycle-to-Date _____ 1000.00	

SUBTOTAL of Receipts This Page (optional).....	_____ 1250.00
TOTAL This Period (last page this line number only).....	_____

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Gloria Bromell Tinubu for Congress

A. Full Name (Last, First, Middle Initial)
Adekunle Osinubi

Mailing Address 5676 Boreal Way SW

City	State	Zip Code
Atlanta	GA	30331-9218

FEC ID number of contributing federal political committee. **C**

Name of Employer self employed	Occupation engineer
-----------------------------------	------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 29 / 2014

Transaction ID : VNW1ED4E749

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Lineta Pritchard

Mailing Address 3 Lakeside Trl

City	State	Zip Code
Myrtle Beach	SC	29577-2429

FEC ID number of contributing federal political committee. **C**

Name of Employer retired	Occupation retired
-----------------------------	-----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
200.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 13 / 2014

Transaction ID : VNW1ECH7QF4

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
Lineta Pritchard

Mailing Address 3 Lakeside Trl

City	State	Zip Code
Myrtle Beach	SC	29577-2429

FEC ID number of contributing federal political committee. **C**

Name of Employer retired	Occupation retired
-----------------------------	-----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1100.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : VNW1ED4PN83

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

950.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Gloria Bromell Tinubu for Congress

A. Full Name (Last, First, Middle Initial)
Lineta Pritchard

Mailing Address 3 Lakeside Trl

City Myrtle Beach State SC Zip Code 29577-2429

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1100.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : VNW1ED4VAA3

Amount of Each Receipt this Period
 400.00

* In-Kind: refreshments for event

B. Full Name (Last, First, Middle Initial)
Susan Redge

Mailing Address 1102 Osprey Ct

City Murrells Inlet State SC Zip Code 29576-8702

FEC ID number of contributing federal political committee. **C**

Name of Employer Jackson & Coker Occupation physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **950.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : VNW1ED2EVY2

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Michael Roberts

Mailing Address 106 Furman Cir

City Conway State SC Zip Code 29526-8881

FEC ID number of contributing federal political committee. **C**

Name of Employer Coastal Carolina University Occupation Dean

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 20 / 2014

Transaction ID : VNW1ECHHJP7

Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1400.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Gloria Bromell Tinubu for Congress

Full Name (Last, First, Middle Initial) A. Madie Robinson		Date of Receipt M M / D D / Y Y Y Y 08 / 27 / 2014	
Mailing Address 1854 Wax Myrtle Dr		Transaction ID : VNW1ECKQDP0	
City Florence	State SC	Zip Code 29501-6485	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00	
Name of Employer Pee Dee Healthy Start	Occupation Executive Director		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) B. Charles Sasser		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014	
Mailing Address 1517 Forest View Rd		Transaction ID : VNW1ED4PNF8	
City Conway	State SC	Zip Code 29527-4816	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Self Employed	Occupation Doctor		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 750.00		

Full Name (Last, First, Middle Initial) C. Bakari Sellers		Date of Receipt M M / D D / Y Y Y Y 09 / 09 / 2014	
Mailing Address 314A Blatt Bldg		Transaction ID : VNW1ECY5N27	
City Columbia	State SC	Zip Code 29201	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer South Carolina Legislature	Occupation Representative		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

SUBTOTAL of Receipts This Page (optional).....	650.00
TOTAL This Period (last page this line number only).....	[Empty Box]

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Gloria Bromell Tinubu for Congress

Full Name (Last, First, Middle Initial) A. Patricia Shama		Date of Receipt M M / D D / Y Y Y Y 09 / 08 / 2014	
Mailing Address 1680 Essex Way		Transaction ID : VNW1ECXNVK9	
City Myrtle Beach	State SC	Zip Code 29577-1794	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Retired	Occupation Volunteer		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1150.00		

Full Name (Last, First, Middle Initial) B. Tomas Sinisterra		Date of Receipt M M / D D / Y Y Y Y 09 / 04 / 2014	
Mailing Address 5105 Antelope Ln Ste 791		Transaction ID : VNW1ECXAGC4	
City Stone Mountain	State GA	Zip Code 30087-1204	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Strategic Properties	Occupation Partner		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) C. Georganna Sinkfield		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2014	
Mailing Address 179 Tonawanda Dr SE		Transaction ID : VNW1ECGS8K2	
City Atlanta	State GA	Zip Code 30315-8429	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer retired	Occupation Georgia House of Representatives		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	[Empty Box]

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 34 OF 120
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Gloria Bromell Tinubu for Congress

A. Full Name (Last, First, Middle Initial)
Georganna Sinkfield

Mailing Address 179 Tonawanda Dr SE

City Atlanta State GA Zip Code 30315-8429

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation Georgia House of Representatives

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 19 / 2014

Transaction ID : VNW1ED4NVN0

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Marva Smalls

Mailing Address 2494 W Edgefield Rd 5M

City Florence State SC Zip Code 29501-1900

FEC ID number of contributing federal political committee. **C**

Name of Employer Viacom Occupation Entertainment Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 18 / 2014

Transaction ID : VNW1ECZ2F32

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
James E. Smith Jr., Esq.

Mailing Address 1718 Hollywood Dr

City Columbia State SC Zip Code 29205-3216

FEC ID number of contributing federal political committee. **C**

Name of Employer James Smith PA Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 11 / 2014

Transaction ID : VNW1ECYH5D5

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2250.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Gloria Bromell Tinubu for Congress

A. Full Name (Last, First, Middle Initial)
Susan O Stevens

Mailing Address 6514 Bryant St
Apt 1

City Myrtle Beach State SC Zip Code 29572-3575

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : VNW1ED4PNE1

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Eldridge Suggs Esq.

Mailing Address 10322 Garden Park Drive
Ste 1500

City Smyrna State GA Zip Code 30080

FEC ID number of contributing federal political committee. **C**

Name of Employer Suggs Attorney at Law Occupation Lawyer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 25 / 2014

Transaction ID : VNW1ECJR0S9

Amount of Each Receipt this Period
1500.00

C. Full Name (Last, First, Middle Initial)
Charles Thomas

Mailing Address 4601 Glyndale Trce SW

City Mableton State GA Zip Code 30126-1486

FEC ID number of contributing federal political committee. **C**

Name of Employer Engineer Occupation WRJ

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 29 / 2014

Transaction ID : VNW1ED29GS0

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2250.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Gloria Bromell Tinubu for Congress

Full Name (Last, First, Middle Initial) A. Onette S. Thomas		Date of Receipt M M / D D / Y Y Y Y 09 / 29 / 2014	
Mailing Address 4601 Glyndale Trce SW		Transaction ID : VNW1ED4E0Q3	
City Mableton	State GA	Zip Code 30126-1486	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer State of Georgia	Occupation Auditor		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) B. Omotayo Tinubu		Date of Receipt M M / D D / Y Y Y Y 08 / 29 / 2014	
Mailing Address 230 Tonawanda Dr SE		Transaction ID : VNW1ECMK921	
City Atlanta	State GA	Zip Code 30315-8432	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 400.00	
Name of Employer Invesco	Occupation Financial Analyst		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 400.00		

Full Name (Last, First, Middle Initial) C. Thomas S Tisdale Esq.		Date of Receipt M M / D D / Y Y Y Y 08 / 19 / 2014	
Mailing Address 109 Broad St		Transaction ID : VNW1ECHCH41	
City Charleston	State SC	Zip Code 29401-2436	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Hellman Yates & Tisdale	Occupation lawyer		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

SUBTOTAL of Receipts This Page (optional).....	900.00
TOTAL This Period (last page this line number only).....	[Empty Box]

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Gloria Bromell Tinubu for Congress

Full Name (Last, First, Middle Initial) A. Milton W. Troy		Date of Receipt M M / D D / Y Y Y Y 08 / 06 / 2014	
Mailing Address PO Box 412		Transaction ID : VNW1ECG6GA8	
City Mullins	State SC	Zip Code 29574-0412	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00	
Name of Employer N/A	Occupation Retired Military		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00		

Full Name (Last, First, Middle Initial) B. Milton W. Troy		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014	
Mailing Address PO Box 412		Transaction ID : VNW1ED2AMJ1	
City Mullins	State SC	Zip Code 29574-0412	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00	
Name of Employer N/A	Occupation Retired Military		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 350.00		

Full Name (Last, First, Middle Initial) C. Holley Ulbrich		Date of Receipt M M / D D / Y Y Y Y 08 / 19 / 2014	
Mailing Address 2 Birch Pl		Transaction ID : VNW1ECHBSE9	
City Clemson	State SC	Zip Code 29631-2019	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00	
Name of Employer retired	Occupation economist		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	300.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Gloria Bromell Tinubu for Congress

A. Full Name (Last, First, Middle Initial)
Lorraine W Wachter

Mailing Address 4505 Camellia Dr

City Myrtle Beach State SC Zip Code 29577-2625

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested Occupation office manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 21 / 2014

Transaction ID : VNW1ECZ6Y19

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Mildred Welch

Mailing Address 1723 Horry St

City Conway State SC Zip Code 29527-4553

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested Occupation Educator

Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 08 / 2014

Transaction ID : VNW1ECXPCE5

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Daryl C. White

Mailing Address 506 Midtown PI NE

City Atlanta State GA Zip Code 30308-1762

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested Occupation Professor

Spelman College

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 13 / 2014

Transaction ID : VNW1ECYNR13

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

600.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 120
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Gloria Bromell Tinubu for Congress

A. Full Name (Last, First, Middle Initial)
Vicki Lundy Wilbon

Mailing Address 1948 Conkle Rd

City Riverdale State GA Zip Code 30296-2823

FEC ID number of contributing federal political committee. **C**

Name of Employer Integral Group LLC Occupation Exec VP

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2014

Transaction ID : VNW1ED4E7N3

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Deirdre S. Williams

Mailing Address 8125 Wacobee Dr

City Myrtle Beach State SC Zip Code 29579-5230

FEC ID number of contributing federal political committee. **C**

Name of Employer self Occupation Dentist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2014

Transaction ID : VNW1ED4NT37

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

500.00

35150.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 120
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Gloria Bromell Tinubu for Congress

A. Full Name (Last, First, Middle Initial)
BUILDING RELATIONSHIPS IN DIVERSE GEOGRAPHIC ENVIRONMENTS PAC (BRIDGE PAC)

Mailing Address 499 S Capitol St SW
Ste 422

City Washington State DC Zip Code 20003-4028

FEC ID number of contributing federal political committee. **C** C00399196

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : VNW1ED4JP58

Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
D.R.I.V.E. - DEMOCRAT, REPUBLICAN, INDEPENDENT VOTER EDUCATION (THE PAC OF THE INTERNATION

Mailing Address 25 Louisiana Ave NW

City Washington State DC Zip Code 20001-2130

FEC ID number of contributing federal political committee. **C** C00032979

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 31 / 2014

Transaction ID : VNW1ECXB825

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS POLITICAL ACTION COMMITTEE

Mailing Address 900 7th St NW

City Washington State DC Zip Code 20001-4089

FEC ID number of contributing federal political committee. **C** C00027342

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 22 / 2014

Transaction ID : VNW1ECMD540

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

15000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 120
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Gloria Bromell Tinubu for Congress

A. Full Name (Last, First, Middle Initial)
INTERNATIONAL LONGSHOREMEN'S ASSOCIATION AFL-CIO COMMITTEE ON POLITICAL EDUCATION ILA-COPE

Mailing Address 5000 W Side Ave

City North Bergen State NJ Zip Code 07047-6439

FEC ID number of contributing federal political committee. **C** C00158576

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 28 / 2014

Transaction ID : VNW1ECWWNV4

Amount of Each Receipt this Period
 3000.00

B. Full Name (Last, First, Middle Initial)
MACHINISTS NON PARTISAN POLITICAL LEAGUE OF THE INTERNATIONAL ASSOCIATION OF MACHINISTS &

Mailing Address 9000 Machinists Pl

City Upper Marlboro State MD Zip Code 20772-2675

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 04 / 2014

Transaction ID : VNW1ECXABZ2

Amount of Each Receipt this Period
 2000.00

C. Full Name (Last, First, Middle Initial)
South Enders Democratic Club

Mailing Address 1936 Sandpiper Ln

City Myrtle Beach State SC Zip Code 29575-5323

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 21 / 2014

Transaction ID : VNW1ECWTZ39

Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5100.00

20100.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 120
	<input type="checkbox"/> 11a 12 <input checked="" type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Gloria Bromell Tinubu for Congress

A. Full Name (Last, First, Middle Initial)
Gloria Bromell Tinubu

Mailing Address 1403 7th Ave

City Conway State SC Zip Code 29526-4219

FEC ID number of contributing federal political committee. **C H2SC07108**

Name of Employer self employed Occupation Economist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
45250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 15 / 2014

Transaction ID : VNW1ECB2ZK1

Amount of Each Receipt this Period
1500.00

B. Full Name (Last, First, Middle Initial)
Gloria Bromell Tinubu

Mailing Address 1403 7th Ave

City Conway State SC Zip Code 29526-4219

FEC ID number of contributing federal political committee. **C H2SC07108**

Name of Employer self employed Occupation Economist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
47050.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 23 / 2014

Transaction ID : VNW1ECB2ZN7

Amount of Each Receipt this Period
1800.00

C. Full Name (Last, First, Middle Initial)
Gloria Bromell Tinubu

Mailing Address 1403 7th Ave

City Conway State SC Zip Code 29526-4219

FEC ID number of contributing federal political committee. **C H2SC07108**

Name of Employer self employed Occupation Economist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
50050.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 15 / 2014

Transaction ID : VNW1ECRDBQ2

Amount of Each Receipt this Period
3000.00

Loan from Candidate

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

6300.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 120
	<input type="checkbox"/> 11a 12 <input checked="" type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Gloria Bromell Tinubu for Congress

A. Full Name (Last, First, Middle Initial)
Gloria Bromell Tinubu

Mailing Address 1403 7th Ave

City Conway State SC Zip Code 29526-4219

FEC ID number of contributing federal political committee. **C H2SC07108**

Name of Employer self employed Occupation Economist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
57050.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 21 / 2014

Transaction ID : VNW1ECZ6ZM2

Amount of Each Receipt this Period
6500.00

B. Full Name (Last, First, Middle Initial)
Gloria Bromell Tinubu

Mailing Address 1403 7th Ave

City Conway State SC Zip Code 29526-4219

FEC ID number of contributing federal political committee. **C H2SC07108**

Name of Employer self employed Occupation Economist

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
57050.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 21 / 2014

Transaction ID : VNW1ED3WER9

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

7000.00

13300.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

(check only one)

<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input checked="" type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)
Gloria Bromell Tinubu for Congress

Full Name (Last, First, Middle Initial) A. Orrie West PA		Date of Receipt M M / D D / Y Y Y Y 08 / 14 / 2014
Mailing Address PO Box 36		Transaction ID : VNW1ECH7QX3
City Conway	State SC	
Zip Code 29528-0036		Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C	Impermissible contribution - to be returned	
Name of Employer	Occupation	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) B.		Date of Receipt M M / D D / Y Y Y Y
Mailing Address		Amount of Each Receipt this Period
City	State	
Zip Code		
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial) C.		Date of Receipt M M / D D / Y Y Y Y
Mailing Address		Amount of Each Receipt this Period
City	State	
Zip Code		
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

SUBTOTAL of Receipts This Page (optional).....	500.00
TOTAL This Period (last page this line number only).....	500.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 45 OF 120	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Gloria Bromell Tinubu for Congress

Full Name (Last, First, Middle Initial) A. A-1 Signs & Graphics		Date of Disbursement MM / DD / YYYY 07 / 10 / 2014
Mailing Address 1610 4th Ave		Amount of Each Disbursement this Period 500.00 Transaction ID : VNV269N0SE9
City Conway	State SC	
Zip Code 29526-5000	Purpose of Disbursement campaign signage	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. A-1 Signs & Graphics		Date of Disbursement MM / DD / YYYY 08 / 04 / 2014
Mailing Address 1610 4th Ave		Amount of Each Disbursement this Period 649.00 Transaction ID : VNV269NYCE8
City Conway	State SC	
Zip Code 29526-5000	Purpose of Disbursement campaign signage	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Accustaff		Date of Disbursement MM / DD / YYYY 09 / 03 / 2014
Mailing Address 519 W Evans St		Amount of Each Disbursement this Period 657.60 Transaction ID : VNV269PCW51
City Florence	State SC	
Zip Code 29501-3407	Purpose of Disbursement staffing services - field staff	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1806.60
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 46 OF 120	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Gloria Bromell Tinubu for Congress

Full Name (Last, First, Middle Initial) A. Accustaff		Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2014
Mailing Address 519 W Evans St		Amount of Each Disbursement this Period 589.10 Transaction ID : VNV269PCW43
City Florence	State SC	
Zip Code 29501-3407	Purpose of Disbursement Staffing services - field staffers	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Titilayo Ali		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014
Mailing Address 1403 7th Ave		Amount of Each Disbursement this Period 2750.00 Transaction ID : VNV269MZSJ2
City Conway	State SC	
Zip Code 29526-4219	Purpose of Disbursement consulting fee: campaign management	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Titilayo Ali		Date of Disbursement M M / D D / Y Y Y Y 07 / 29 / 2014
Mailing Address 1403 7th Ave		Amount of Each Disbursement this Period 2750.00 Transaction ID : VNV269NYCX6
City Conway	State SC	
Zip Code 29526-4219	Purpose of Disbursement consulting fee: campaign management	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	6089.10
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 47 OF 120	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Gloria Bromell Tinubu for Congress

Full Name (Last, First, Middle Initial) A. Titilayo Ali		Date of Disbursement MM / DD / YYYY 08 / 19 / 2014
Mailing Address 1403 7th Ave		Amount of Each Disbursement this Period 1375.00 Transaction ID : VNV269PCW69
City Conway	State SC	
Zip Code 29526-4219	Purpose of Disbursement consulting fee - campaign management	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Titilayo Ali		Date of Disbursement MM / DD / YYYY 08 / 19 / 2014
Mailing Address 1403 7th Ave		Amount of Each Disbursement this Period 1375.00 Transaction ID : VNV269PCW77
City Conway	State SC	
Zip Code 29526-4219	Purpose of Disbursement consulting fee - campaign management	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Titilayo Ali		Date of Disbursement MM / DD / YYYY 09 / 02 / 2014
Mailing Address 1403 7th Ave		Amount of Each Disbursement this Period 1375.00 Transaction ID : VNV269PCW85
City Conway	State SC	
Zip Code 29526-4219	Purpose of Disbursement consulting fee - campaign management	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	4125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 120			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Gloria Bromell Tinubu for Congress

Full Name (Last, First, Middle Initial) A. Titilayo Ali		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address 1403 7th Ave		Amount of Each Disbursement this Period 1375.00 Transaction ID : VNV269PCW93
City Conway	State SC Zip Code 29526-4219	
Purpose of Disbursement consulting fees - campaign management		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Titilayo Ali		Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2014
Mailing Address 1403 7th Ave		Amount of Each Disbursement this Period 2000.00 Transaction ID : VNV269PCVH3
City Conway	State SC Zip Code 29526-4219	
Purpose of Disbursement consulting fee - campaign management		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Titilayo Ali		Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2014
Mailing Address 1403 7th Ave		Amount of Each Disbursement this Period 2000.00 Transaction ID : VNV269PNYV9
City Conway	State SC Zip Code 29526-4219	
Purpose of Disbursement consulting fee - campaign manager		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	5375.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 49 OF 120	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Gloria Bromell Tinubu for Congress

Full Name (Last, First, Middle Initial) A. ApaFirm, Inc		Date of Disbursement MM / DD / YYYY 08 / 08 / 2014
Mailing Address 7900 Harbor Island Dr Apt 1207		Amount of Each Disbursement this Period 3520.00 Transaction ID : VNV269NYD83
City Miami State FL Zip Code 33141-4297	Purpose of Disbursement Consulting Fee Retainer- Fundraising Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. ApaFirm, Inc		Date of Disbursement MM / DD / YYYY 09 / 02 / 2014
Mailing Address 7900 Harbor Island Dr Apt 1207		Amount of Each Disbursement this Period 2519.42 Transaction ID : VNV269PCWA1
City Miami State FL Zip Code 33141-4297	Purpose of Disbursement consulting fees - fundraising Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. ApaFirm, Inc		Date of Disbursement MM / DD / YYYY 09 / 18 / 2014
Mailing Address 7900 Harbor Island Dr Apt 1207		Amount of Each Disbursement this Period 498.85 Transaction ID : VNV269PCWB8
City Miami State FL Zip Code 33141-4297	Purpose of Disbursement consulting fees - fundraising Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	6538.27
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 50 OF 120	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Gloria Bromell Tinubu for Congress

Full Name (Last, First, Middle Initial) A. Cambridge Offset Printing		Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2014
Mailing Address 56 Creighton St		Amount of Each Disbursement this Period 574.87 Transaction ID : VNV269PCY96
City Cambridge	State MA	
Zip Code 02140-2005	Purpose of Disbursement printing services	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Capitalist Properties LLC		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 6830 Middleton Rd		Amount of Each Disbursement this Period 1400.00 Transaction ID : VNV269MZFK0
City Conway	State SC	
Zip Code 29527-3865	Purpose of Disbursement office rental 1st month rent and deposit	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Capitalist Properties LLC		Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2014
Mailing Address 6830 Middleton Rd		Amount of Each Disbursement this Period 700.00 Transaction ID : VNV269NYD42
City Conway	State SC	
Zip Code 29527-3865	Purpose of Disbursement office rent -702A Main Street	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2674.87
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 51 OF 120	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Gloria Bromell Tinubu for Congress

Full Name (Last, First, Middle Initial) A. Capitalist Properties LLC		Date of Disbursement M M / D D / Y Y Y Y 08 / 26 / 2014
Mailing Address 6830 Middleton Rd		Amount of Each Disbursement this Period 700.00 Transaction ID : VNV269PCWX1
City Conway	State SC	
Zip Code 29527-3865	Purpose of Disbursement office rent expense	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Conway National Bank		Date of Disbursement M M / D D / Y Y Y Y 08 / 27 / 2014
Mailing Address PO Box 320		Amount of Each Disbursement this Period 51.79 Transaction ID : VNV269NZ1A2
City Conway	State SC	
Zip Code 29528-0320	Purpose of Disbursement check printing	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Conway National Bank		Date of Disbursement M M / D D / Y Y Y Y 08 / 27 / 2014
Mailing Address PO Box 320		Amount of Each Disbursement this Period 0.50 Transaction ID : VNV269PA072
City Conway	State SC	
Zip Code 29528-0320	Purpose of Disbursement bank fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	752.29
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 53 OF 120	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Gloria Bromell Tinubu for Congress

Full Name (Last, First, Middle Initial) A. Saliou Dioum		Date of Disbursement M M / D D / Y Y Y Y 08 / 18 / 2014
Mailing Address 6605 Clayton Ave		Amount of Each Disbursement this Period 1290.32 Transaction ID : VNV269P5BJ2
City Saint Louis State MO Zip Code 63139-3369	Purpose of Disbursement Consulting fee: field director	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Saliou Dioum		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address 6605 Clayton Ave		Amount of Each Disbursement this Period 198.73 Transaction ID : VNV269PA0F5
City Saint Louis State MO Zip Code 63139-3369	Purpose of Disbursement travel expenses	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. First Data Corporation		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2014
Mailing Address 5565 Glenridge Connector		Amount of Each Disbursement this Period 162.61 Transaction ID : VNV269N02C6
City Atlanta State GA Zip Code 30342-1651	Purpose of Disbursement credit card processing fees	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1651.66
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 54 OF 120	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Gloria Bromell Tinubu for Congress

A. First Data Corporation

Full Name (Last, First, Middle Initial)
Mailing Address 5565 Glenridge Connector

City Atlanta State GA Zip Code 30342-1651

Purpose of Disbursement credit card processing fees

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 08 / 04 / 2014

Amount of Each Disbursement this Period: 143.19

Transaction ID : VNV269NHNM2

B. First Data Corporation

Full Name (Last, First, Middle Initial)
Mailing Address 5565 Glenridge Connector

City Atlanta State GA Zip Code 30342-1651

Purpose of Disbursement credit card processing fees

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 09 / 03 / 2014

Amount of Each Disbursement this Period: 298.69

Transaction ID : VNV269P7E69

c. Google Apps

Full Name (Last, First, Middle Initial)
Mailing Address 1600 Amphitheatre Pkwy

City Mountain View State CA Zip Code 94043-1351

Purpose of Disbursement advertising/email

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 03 / 2014

Amount of Each Disbursement this Period: 45.00

Transaction ID : VNV269MZTE4

SUBTOTAL of Disbursements This Page (optional) 486.88

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 120			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Gloria Bromell Tinubu for Congress

Full Name (Last, First, Middle Initial) A. Google Apps		Date of Disbursement MM / DD / YYYY 08 / 04 / 2014
Mailing Address 1600 Amphitheatre Pkwy		Amount of Each Disbursement this Period 45.00
City Mountain View	State CA	
Zip Code 94043-1351	Purpose of Disbursement advertising/email services	Transaction ID : VNV269NHNQ5
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Google Apps		Date of Disbursement MM / DD / YYYY 08 / 05 / 2014
Mailing Address 1600 Amphitheatre Pkwy		Amount of Each Disbursement this Period 2.90
City Mountain View	State CA	
Zip Code 94043-1351	Purpose of Disbursement advertising/email services	Transaction ID : VNV269NHNHR3
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Google Apps		Date of Disbursement MM / DD / YYYY 09 / 08 / 2014
Mailing Address 1600 Amphitheatre Pkwy		Amount of Each Disbursement this Period 98.36
City Mountain View	State CA	
Zip Code 94043-1351	Purpose of Disbursement advertising/email services	Transaction ID : VNV269PA0A6
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	146.26
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 56 OF 120	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Gloria Bromell Tinubu for Congress

Full Name (Last, First, Middle Initial) A. Google Apps		Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2014
Mailing Address 1600 Amphitheatre Pkwy		Amount of Each Disbursement this Period 45.00
City Mountain View	State CA Zip Code 94043-1351	
Purpose of Disbursement advertising/email services		Transaction ID : VNV269PCYQ7
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Delphine Hall		Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2014
Mailing Address 5511 Thomas Sim Lee Ter		Amount of Each Disbursement this Period 300.00
City Upper Marlboro	State MD Zip Code 20772-7405	
Purpose of Disbursement consulting fee; fundraising 2014		Transaction ID : VNV269N0ER6
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Delphine Hall		Date of Disbursement M M / D D / Y Y Y Y 08 / 16 / 2014
Mailing Address 5511 Thomas Sim Lee Ter		Amount of Each Disbursement this Period 500.00
City Upper Marlboro	State MD Zip Code 20772-7405	
Purpose of Disbursement consulting fees - graphic design		Transaction ID : VNV269PCWE2
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	845.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 57 OF 120	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Gloria Bromell Tinubu for Congress

Full Name (Last, First, Middle Initial) A. Delphine Hall		Date of Disbursement MM / DD / YYYY 08 / 16 / 2014
Mailing Address 5511 Thomas Sim Lee Ter		Amount of Each Disbursement this Period \$ 100.00 Transaction ID : VNV269PCWF0
City Upper Marlboro	State MD	
Zip Code 20772-7405	Purpose of Disbursement design work for invitation	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Delphine Hall		Date of Disbursement MM / DD / YYYY 08 / 26 / 2014
Mailing Address 5511 Thomas Sim Lee Ter		Amount of Each Disbursement this Period \$ 3120.00 Transaction ID : VNV269PA064
City Upper Marlboro	State MD	
Zip Code 20772-7405	Purpose of Disbursement design and production of palm cards	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Delphine Hall		Date of Disbursement MM / DD / YYYY 09 / 16 / 2014
Mailing Address 5511 Thomas Sim Lee Ter		Amount of Each Disbursement this Period \$ 200.00 Transaction ID : VNV269PCWK2
City Upper Marlboro	State MD	
Zip Code 20772-7405	Purpose of Disbursement consulting fees - graphic design services	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	\$ 3420.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 120		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
Gloria Bromell Tinubu for Congress

Full Name (Last, First, Middle Initial) A. Delphine Hall		Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2014
Mailing Address 5511 Thomas Sim Lee Ter		Amount of Each Disbursement this Period 500.00 Transaction ID : VNV269PCWMO
City Upper Marlboro	State MD	
Zip Code 20772-7405	Purpose of Disbursement consulting fees - graphic design services	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) B. Dwane D Heyward		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014
Mailing Address 92 Abraham Pl		Amount of Each Disbursement this Period 1500.00 Transaction ID : VNV269N0C36
City Georgetown	State SC	
Zip Code 29440-6341	Purpose of Disbursement consulting fee- campaign management	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) c. Dwane D Heyward		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2014
Mailing Address 92 Abraham Pl		Amount of Each Disbursement this Period 700.00 Transaction ID : VNV269P5BH4
City Georgetown	State SC	
Zip Code 29440-6341	Purpose of Disbursement consulting fee- finance management	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	2700.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 120		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
Gloria Bromell Tinubu for Congress

Full Name (Last, First, Middle Initial) A. Dwane D Heyward		Date of Disbursement M M / D D / Y Y Y Y 08 / 16 / 2014
Mailing Address 92 Abraham Pl		Amount of Each Disbursement this Period 1300.00 Transaction ID : VNV269PCWC6
City Georgetown	State SC	
Purpose of Disbursement consulting fee - finance management		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) B. Dwane D Heyward		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address 92 Abraham Pl		Amount of Each Disbursement this Period 1365.59 Transaction ID : VNV269PCWD4
City Georgetown	State SC	
Purpose of Disbursement consulting fee - finance management		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) c. Dewon Huggins		Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2014
Mailing Address 1017 3rd Ave		Amount of Each Disbursement this Period 1125.00 Transaction ID : VNV269NYCP1
City Conway	State SC	
Purpose of Disbursement web design/web monitoring		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	3790.59
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 120			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Gloria Bromell Tinubu for Congress

Full Name (Last, First, Middle Initial) A. Dewon Huggins		Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2014
Mailing Address 1017 3rd Ave		Amount of Each Disbursement this Period 200.00 Transaction ID : VNV269PCWQ3
City Conway	State SC	
Purpose of Disbursement website maintenance		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) B. Dewon Huggins		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 1017 3rd Ave		Amount of Each Disbursement this Period 200.00 Transaction ID : VNV269PNYW7
City Conway	State SC	
Purpose of Disbursement web administration and social media consulting		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) C. Kmart		Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2014
Mailing Address 1610 Church St Ste U		Amount of Each Disbursement this Period 282.72 Transaction ID : VNV269PA023
City Conway	State SC	
Purpose of Disbursement tablets for canvassing		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	682.72
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 61 OF 120	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Gloria Bromell Tinubu for Congress

Full Name (Last, First, Middle Initial) A. Kmart		Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2014
Mailing Address 1610 Church St Ste U		Amount of Each Disbursement this Period 50.00
City Conway	State SC Zip Code 29526-2932	
Purpose of Disbursement office supplies		Transaction ID : VNV269PNYP9
Candidate Name		
Office Sought:	Disbursement For: 2014	Category/ Type
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) B. Kmart		Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2014
Mailing Address 1610 Church St Ste U		Amount of Each Disbursement this Period 64.18
City Conway	State SC Zip Code 29526-2932	
Purpose of Disbursement office supplies		Transaction ID : VNV269PNYK6
Candidate Name		
Office Sought:	Disbursement For: 2014	Category/ Type
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) C. Kmart		Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2014
Mailing Address 1610 Church St Ste U		Amount of Each Disbursement this Period 68.48
City Conway	State SC Zip Code 29526-2932	
Purpose of Disbursement office supplies		Transaction ID : VNV269PNYM4
Candidate Name		
Office Sought:	Disbursement For: 2014	Category/ Type
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	182.66
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 62 OF 120	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Gloria Bromell Tinubu for Congress

Full Name (Last, First, Middle Initial) A. Kireem Liles		Date of Disbursement MM / DD / YYYY 08 / 19 / 2014
Mailing Address 1190 Highway 9 W		Amount of Each Disbursement this Period 322.58 Transaction ID : VNV269PX8E4
City Bennettsville	State SC	
Zip Code 29512-6138	Purpose of Disbursement consulting fees-field coordinator	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Kireem Liles		Date of Disbursement MM / DD / YYYY 09 / 15 / 2014
Mailing Address 1190 Highway 9 W		Amount of Each Disbursement this Period 322.58 Transaction ID : VNV269PCWT7
City Bennettsville	State SC	
Zip Code 29512-6138	Purpose of Disbursement Consulting fee - field coordinator	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Media, Inc.		Date of Disbursement MM / DD / YYYY 09 / 05 / 2014
Mailing Address 404 Brightling Way		Amount of Each Disbursement this Period 1000.00 Transaction ID : VNV269PCYC0
City Holly Springs	State NC	
Zip Code 27540-3313	Purpose of Disbursement media consulting fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1645.16
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 63 OF 120	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Gloria Bromell Tinubu for Congress

Full Name (Last, First, Middle Initial) A. NGP Van Inc		Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2014
Mailing Address 1101 15th St NW Ste 500		Amount of Each Disbursement this Period 2100.00
City Washington	State DC Zip Code 20005-5006	
Purpose of Disbursement campaign database fees		Transaction ID : VNV269NHNP8
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. NGP Van Inc		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2014
Mailing Address 1101 15th St NW Ste 500		Amount of Each Disbursement this Period 2100.00
City Washington	State DC Zip Code 20005-5006	
Purpose of Disbursement campaign compliance and fundraising database		Transaction ID : VNV269PCWV5
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Nia Interactive		Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2014
Mailing Address PO Box 4570		Amount of Each Disbursement this Period 500.00
City Washington	State DC Zip Code 20017-0570	
Purpose of Disbursement Online fundraising/web adminstrator		Transaction ID : VNV269PCYD8
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4700.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 120			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Gloria Bromell Tinubu for Congress

Full Name (Last, First, Middle Initial) A. Office Depot #2179		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014
Mailing Address 2701 Church St Ste A		Amount of Each Disbursement this Period 51.36 Transaction ID : VNV269NYC81
City Conway	State SC Zip Code 29526-4422	
Purpose of Disbursement office supplies	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) B. Office Depot #2179		Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2014
Mailing Address 2701 Church St Ste A		Amount of Each Disbursement this Period 101.64 Transaction ID : VNV269PA049
City Conway	State SC Zip Code 29526-4422	
Purpose of Disbursement ink cartridge	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) c. Office Depot #2179		Date of Disbursement M M / D D / Y Y Y Y 08 / 29 / 2014
Mailing Address 2701 Church St Ste A		Amount of Each Disbursement this Period 37.44 Transaction ID : VNV269PA0B4
City Conway	State SC Zip Code 29526-4422	
Purpose of Disbursement office supplies	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	190.44
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 120			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Gloria Bromell Tinubu for Congress

Full Name (Last, First, Middle Initial) A. Office Depot #2179		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address 2701 Church St Ste A		Amount of Each Disbursement this Period 17.11
City Conway	State SC Zip Code 29526-4422	
Purpose of Disbursement office supplies	Candidate Name	Transaction ID : VNV269PA0C2
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Office Depot #2179		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2014
Mailing Address 2701 Church St Ste A		Amount of Each Disbursement this Period 3.52
City Conway	State SC Zip Code 29526-4422	
Purpose of Disbursement office supplies	Candidate Name	Transaction ID : VNV269PCW19
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Office Depot #2179		Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2014
Mailing Address 2701 Church St Ste A		Amount of Each Disbursement this Period 40.65
City Conway	State SC Zip Code 29526-4422	
Purpose of Disbursement office supplies - toner	Candidate Name	Transaction ID : VNV269PCW27
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	61.28
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 66 OF 120	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Gloria Bromell Tinubu for Congress

A. Office Depot #2179

Full Name (Last, First, Middle Initial)
Mailing Address 2701 Church St
Ste A

City Conway State SC Zip Code 29526-4422

Purpose of Disbursement office supplies

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement 09 / 16 / 2014

Amount of Each Disbursement this Period 32.69

Transaction ID : VNV269PCW35

Category/Type

B. Charles A Prescott Jr., Esq.

Full Name (Last, First, Middle Initial)
Mailing Address 432 Bay Dr

City Murrells Inlet State SC Zip Code 29576-8722

Purpose of Disbursement consulting fee - fundraising services

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement 09 / 02 / 2014

Amount of Each Disbursement this Period 482.16

Transaction ID : VNV269PCWW3

Category/Type

c. Lineta Pritchard

Full Name (Last, First, Middle Initial)
Mailing Address 3 Lakeside Trl

City Myrtle Beach State SC Zip Code 29577-2429

Purpose of Disbursement refreshments for event

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement 09 / 30 / 2014

Amount of Each Disbursement this Period 400.00

Transaction ID : VNW1ED4VAA3I

* In-Kind Received

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 914.85

TOTAL This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 67 OF 120	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Gloria Bromell Tinubu for Congress

Full Name (Last, First, Middle Initial) A. Sandra Saunders		Date of Disbursement MM / DD / YYYY 08 / 19 / 2014
Mailing Address 702 Elm St		Amount of Each Disbursement this Period 400.00 Transaction ID : VNV269P5BP4
City Conway	State SC	
Zip Code 29526-4373	Purpose of Disbursement housing for Field Director	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Sandra Saunders		Date of Disbursement MM / DD / YYYY 09 / 25 / 2014
Mailing Address 702 Elm St		Amount of Each Disbursement this Period 200.00 Transaction ID : VNV269PNX11
City Conway	State SC	
Zip Code 29526-4373	Purpose of Disbursement housing for field director	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Sleep Inn		Date of Disbursement MM / DD / YYYY 08 / 18 / 2014
Mailing Address 3345 Church Street Hwy 501		Amount of Each Disbursement this Period 223.98 Transaction ID : VNV269NYCJ0
City Conway	State SC	
Zip Code 29526	Purpose of Disbursement campaign housing	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	823.98
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 120			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Gloria Bromell Tinubu for Congress

Full Name (Last, First, Middle Initial) A. Sleep Inn		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address 3345 Church Street Hwy 501		Amount of Each Disbursement this Period 201.58 Transaction ID : VNV269PA0E8
City Conway State SC Zip Code 29526	Purpose of Disbursement staff lodging	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Sleep Inn		Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2014
Mailing Address 3345 Church Street Hwy 501		Amount of Each Disbursement this Period 83.99 Transaction ID : VNV269PR291
City Conway State SC Zip Code 29526	Purpose of Disbursement Staff Lodging	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Sleep Inn		Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2014
Mailing Address 3345 Church Street Hwy 501		Amount of Each Disbursement this Period 167.98 Transaction ID : VNV269PR2A9
City Conway State SC Zip Code 29526	Purpose of Disbursement staff lodging	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	453.55
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 69 OF 120	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Gloria Bromell Tinubu for Congress

Full Name (Last, First, Middle Initial) A. Tredessa Smalls		Date of Disbursement MM / DD / YYYY 08 / 19 / 2014
Mailing Address 10204 Freewoods Rd		Amount of Each Disbursement this Period 387.09
City Myrtle Beach	State SC	
Zip Code 29588-5217	Purpose of Disbursement consulting fee- email monitoring	Transaction ID : VNV269P5BN6
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Tredessa Smalls		Date of Disbursement MM / DD / YYYY 09 / 15 / 2014
Mailing Address 10204 Freewoods Rd		Amount of Each Disbursement this Period 1000.00
City Myrtle Beach	State SC	
Zip Code 29588-5217	Purpose of Disbursement consulting fees - volunteer coordinator	Transaction ID : VNV269PCWS9
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. South Carolina Democratic Party		Date of Disbursement MM / DD / YYYY 09 / 19 / 2014
Mailing Address PO Box 5965		Amount of Each Disbursement this Period 4000.00
City Columbia	State SC	
Zip Code 29250-5965	Purpose of Disbursement Coordinated Campaign and voter file fees	Transaction ID : VNV269PCVP3
Candidate Name South Carolina Democratic Party	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	5387.09
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 120			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Gloria Bromell Tinubu for Congress

Full Name (Last, First, Middle Initial) A. Southeastern Insurance Consultants, LLC		Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2014
Mailing Address PO Box 525		Amount of Each Disbursement this Period 752.60 Transaction ID : VNV269PCYB2
City Conway	State SC	
Zip Code 29528-0525	Purpose of Disbursement general liability insurance	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Spirit Airlines		Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2014
Mailing Address 2800 Executive Way		Amount of Each Disbursement this Period 299.18 Transaction ID : VNV269PA056
City Miramar	State FL	
Zip Code 33025-6542	Purpose of Disbursement staff travel	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Spirit Airlines		Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2014
Mailing Address 2800 Executive Way		Amount of Each Disbursement this Period 374.18 Transaction ID : VNV269PCX78
City Miramar	State FL	
Zip Code 33025-6542	Purpose of Disbursement staff travel	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1425.96
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 71 OF 120	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Gloria Bromell Tinubu for Congress

Full Name (Last, First, Middle Initial) A. Taylor Collective Solutions		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 1524 S Interstate 35 Ste 200		Amount of Each Disbursement this Period 1250.00
City Austin State TX Zip Code 78704-8931	Purpose of Disbursement final payment consulting fee- fundraising	
Candidate Name	Category/Type	Transaction ID : VNV269MZRQ1
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Gloria Bromell Tinubu		Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2014
Mailing Address 1403 7th Ave		Amount of Each Disbursement this Period 3500.00
City Conway State SC Zip Code 29526-4219	Purpose of Disbursement reimburse for voter file purchase through state party	
Candidate Name Gloria Bromell Tinubu	Category/Type	Transaction ID : VNV269PCWH6
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: SC District: 07	

Full Name (Last, First, Middle Initial) c. South Carolina Democratic Party		Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2014
Mailing Address PO Box 5965		Amount of Each Disbursement this Period 3500.00
City Columbia State SC Zip Code 29250-5965	Purpose of Disbursement Vote Builder - voter file database	
Candidate Name South Carolina Democratic Party	Category/Type	Transaction ID : VNV269PCWJ4 [MEMO ITEM] *
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	4750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 72 OF 120	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Gloria Bromell Tinubu for Congress

Full Name (Last, First, Middle Initial) A. United States Postal Service		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2014
Mailing Address Conway Main PO		Amount of Each Disbursement this Period 5.60
City Conway	State SC Zip Code 29526	
Purpose of Disbursement postage	Category/Type	Transaction ID : VNV269NYBX4
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. United States Postal Service		Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2014
Mailing Address Conway Main PO		Amount of Each Disbursement this Period 19.99
City Conway	State SC Zip Code 29526	
Purpose of Disbursement postage	Category/Type	Transaction ID : VNV269NYC07
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. United States Postal Service		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address Conway Main PO		Amount of Each Disbursement this Period 49.00
City Conway	State SC Zip Code 29526	
Purpose of Disbursement stamps	Category/Type	Transaction ID : VNV269PA0D0
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	74.59
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 73 OF 120	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Gloria Bromell Tinubu for Congress

Full Name (Last, First, Middle Initial) A. United States Postal Service		Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2014
Mailing Address Conway Main PO		Amount of Each Disbursement this Period 245.00
City Conway	State SC Zip Code 29526	
Purpose of Disbursement postage	Category/Type	Transaction ID : VNV269PCXM0
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2014
Mailing Address 2709 Church St		Amount of Each Disbursement this Period 287.03
City Conway	State SC Zip Code 29526-4440	
Purpose of Disbursement campaign cell phone services	Category/Type	Transaction ID : VNV269N0NF0
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2014
Mailing Address 2709 Church St		Amount of Each Disbursement this Period 335.72
City Conway	State SC Zip Code 29526-4440	
Purpose of Disbursement campaign cell phone	Category/Type	Transaction ID : VNV269NYCF6
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	867.75
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 74 OF 120	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Gloria Bromell Tinubu for Congress

Full Name (Last, First, Middle Initial) A. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2014
Mailing Address 2709 Church St		Amount of Each Disbursement this Period 311.83 Transaction ID : VNV269PCXY9
City Conway	State SC	
Zip Code 29526-4440	Purpose of Disbursement telephone	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Walmart #0586		Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2014
Mailing Address 2709 Church St Ste A		Amount of Each Disbursement this Period 7.48 Transaction ID : VNV269PA031
City Conway	State SC	
Zip Code 29526-4440	Purpose of Disbursement office supplies	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Walmart #0586		Date of Disbursement M M / D D / Y Y Y Y 08 / 26 / 2014
Mailing Address 2709 Church St Ste A		Amount of Each Disbursement this Period 44.94 Transaction ID : VNV269PNYQ7
City Conway	State SC	
Zip Code 29526-4440	Purpose of Disbursement office supplies	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	364.25
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 75 OF 120	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Gloria Bromell Tinubu for Congress

Full Name (Last, First, Middle Initial) A. Leon Wilson		Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2014
Mailing Address 700 Ridge St		Amount of Each Disbursement this Period 150.00 Transaction ID : VNV269N28N4
City Conway	State SC	
Zip Code 29527-5523	Purpose of Disbursement moving expense 702A	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Leon Wilson		Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2014
Mailing Address 700 Ridge St		Amount of Each Disbursement this Period 75.00 Transaction ID : VNV269PCWY9
City Conway	State SC	
Zip Code 29527-5523	Purpose of Disbursement moving expense	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Woodfield Group Inc.		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014
Mailing Address 1118 Old Breckenridge Ln		Amount of Each Disbursement this Period 1200.00 Transaction ID : VNV269MZXX9
City Montgomery	State AL	
Zip Code 36117-8961	Purpose of Disbursement consulting fee- compliance June 2014	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1425.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 76 OF 120	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Gloria Bromell Tinubu for Congress

Full Name (Last, First, Middle Initial) A. Woodfield Group Inc.		Date of Disbursement M M / D D / Y Y Y Y 08 / 26 / 2014
Mailing Address 1118 Old Breckenridge Ln		Amount of Each Disbursement this Period 2400.00
City Montgomery	State AL	
Zip Code 36117-8961	Purpose of Disbursement consulting fee - compliance services	Transaction ID : VNV269PCVN5
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Woodfield Group Inc.		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2014
Mailing Address 1118 Old Breckenridge Ln		Amount of Each Disbursement this Period 1200.00
City Montgomery	State AL	
Zip Code 36117-8961	Purpose of Disbursement consulting fee - compliance services	Transaction ID : VNV269PCVK9
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3600.00
TOTAL This Period (last page this line number only).....	72297.37

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 77 OF 120	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Gloria Bromell Tinubu for Congress

Full Name (Last, First, Middle Initial) A. Orrie West PA		Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2014
Mailing Address PO Box 36		Amount of Each Disbursement this Period 500.00 Transaction ID : VNV269PNW60
City Conway	State SC	
Zip Code 29528-0036	Purpose of Disbursement refund impermissible contribution	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) B. Soul Vegetarian Restaurant		Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2014
Mailing Address 879A Ralph David Abernathy Blvd SW		Amount of Each Disbursement this Period 500.00 Transaction ID : VNV269PNWE4
City Atlanta	State GA	
Zip Code 30310-1800	Purpose of Disbursement reissue of check #663 lost	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) c. Soul Vegetarian Restaurant		Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2014
Mailing Address 879A Ralph David Abernathy Blvd SW		Amount of Each Disbursement this Period -500.00 Transaction ID : VNV269PNWJ5
City Atlanta	State GA	
Zip Code 30310-1800	Purpose of Disbursement reverse 3/30/2012 transaction for refund contribution. Check663 lost and refunded	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
State: District:	Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	500.00
TOTAL This Period (last page this line number only).....	500.00

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) Transaction ID : VNW1ECAQFA9L
Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial) Gloria Bromell Tinubu	[PERSONAL FUNDS]	Election: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 1403 7th Ave		

City	State	ZIP Code
Conway	SC	29526-4219

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
5000.00	2000.00	3000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 12 / D 30 / Y 2011	M M / D D / Y none	none % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>

SUBTOTALS This Period This Page (optional).....	<input style="width: 100%;" type="text" value="3000.00"/>
TOTALS This Period (last page in this line only).....	<input style="width: 100%;" type="text"/>
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.	

SCHEDULE C (FEC Form 3)
LOANS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : VNW1ECAQFR9L

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

Gloria Bromell Tinubu

Primary

General

Other (specify) ▼

Mailing Address

1403 7th Ave

City

State

ZIP Code

Conway

SC

29526-4219

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

10000.00

0.00

10000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

02

01

2012

none

none

% (apr)

Yes

No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

SUBTOTALS This Period This Page (optional)..... ▶

10000.00

TOTALS This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Gloria Bromell Tinubu for Congress** Transaction ID : **VNW1ECAQFH4L**

LOAN SOURCE Full Name (Last, First, Middle Initial) **[PERSONAL FUNDS]** Gloria Bromell Tinubu
 Election: 2012
 Primary
 General
 Other (specify) ▼

Mailing Address
 1403 7th Ave
 City State ZIP Code
 Conway SC 29526-4219

Original Amount of Loan 10000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 10000.00
-------------------------------------	------------------------------------	---

TERMS
 Date Incurred: M 02 / D 14 / Y 2012
 Date Due: M / D / Y none
 Interest Rate: none % (apr)
 Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)..... ▶ 10000.00
TOTALS This Period (last page in this line only)..... ▶ []

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3) LOANS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full) **Gloria Bromell Tinubu for Congress** Transaction ID : **VNW1ECAQFE0L**

LOAN SOURCE Full Name (Last, First, Middle Initial) Gloria Bromell Tinubu	[PERSONAL FUNDS]	Election: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 1403 7th Ave		

City	State	ZIP Code
Conway	SC	29526-4219

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
13000.00	0.00	13000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 03 / D 05 / Y 2012	M M / D D / Y none	none % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....	▶	13000.00
TOTALS This Period (last page in this line only).....	▶	[]

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : VNW1ECAQFB6L

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

Gloria Bromell Tinubu

Primary
 General
 Other (specify) ▼

Mailing Address
1403 7th Ave

City State ZIP Code
Conway SC 29526-4219

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
10000.00 0.00 10000.00

TERMS

Date Incurred Date Due Interest Rate Secured:
03 / 14 / 2012 non none % (apr) Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)..... ▶ 10000.00
TOTALS This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : VNW1ECAQFN5L

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

Gloria Bromell Tinubu

Primary
 General
 Other (specify) ▼

Mailing Address
1403 7th Ave

City State ZIP Code
Conway SC 29526-4219

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
10000.00 0.00 10000.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 03 / D 14 / Y 2012 M M / D D / Y none none % (apr) Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)..... 10000.00

TOTALS This Period (last page in this line only).....

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Gloria Bromell Tinubu for Congress** Transaction ID : **VNW1ECAQFC4L**

LOAN SOURCE Full Name (Last, First, Middle Initial) Gloria Bromell Tinubu	[PERSONAL FUNDS]	Election: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 1403 7th Ave		

City	State	ZIP Code
Conway	SC	29526-4219

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
51000.00	0.00	51000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 03 / D 30 / Y 2012 Y	M M / D D / Y none Y Y	none % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....	▶	51000.00
TOTALS This Period (last page in this line only).....	▶	[]

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Gloria Bromell Tinubu for Congress** Transaction ID : **VNW1ECAQFJ2L**

LOAN SOURCE Full Name (Last, First, Middle Initial) **[PERSONAL FUNDS]** Gloria Bromell Tinubu
 Election: 2012
 Primary
 General
 Other (specify) ▼

Mailing Address
 1403 7th Ave
 City State ZIP Code
 Conway SC 29526-4219

Original Amount of Loan 25000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 25000.00
-------------------------------------	------------------------------------	---

TERMS
 Date Incurred: M 05 / D 14 / Y 2012
 Date Due: M / D / Y none
 Interest Rate: none % (apr)
 Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....	▶	[] 25000.00
TOTALS This Period (last page in this line only).....	▶	[]

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : VNW1ECAQFQ1L

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

Gloria Bromell Tinubu

Primary
 General
 Other (specify) ▼

Mailing Address
1403 7th Ave

City State ZIP Code
Conway SC 29526-4219

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
5000.00 0.00 5000.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 05 / D 21 / Y 2012 M M / D D / Y none none % (apr) Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)..... 5000.00

TOTALS This Period (last page in this line only).....

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)
LOANS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

13a
 13b

NAME OF COMMITTEE (In Full) **Gloria Bromell Tinubu for Congress** Transaction ID : **VNW1ECAQFP3L**

LOAN SOURCE Full Name (Last, First, Middle Initial) Gloria Bromell Tinubu	[PERSONAL FUNDS]	Election: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 1403 7th Ave		

City	State	ZIP Code
Conway	SC	29526-4219

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
25000.00	0.00	25000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 05 / D 30 / Y 2012	M M / D D / Y none	none % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width:100%" type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width:100%" type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width:100%" type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width:100%" type="text"/>

SUBTOTALS This Period This Page (optional).....	25000.00
TOTALS This Period (last page in this line only).....	<input style="width:100%" type="text"/>

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : VNW1ECAQFG6L

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

Gloria Bromell Tinubu

Primary
 General
 Other (specify) ▼

Mailing Address
1403 7th Ave

City State ZIP Code
Conway SC 29526-4219

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
30000.00 0.00 30000.00

TERMS

Date Incurred Date Due Interest Rate Secured:
06 / 04 / 2012 none % (apr) Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)..... 30000.00
TOTALS This Period (last page in this line only).....

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : VNW1ECAQFD2L

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

Gloria Bromell Tinubu

Primary
 General
 Other (specify) ▼

Mailing Address
1403 7th Ave

City State ZIP Code
Conway SC 29526-4219

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
30000.00 0.00 30000.00

TERMS

Date Incurred Date Due Interest Rate Secured:
06 / 07 / 2012 no due date none % (apr) Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)..... 30000.00

TOTALS This Period (last page in this line only).....

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : VNW1ECAQFS7L

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

Gloria Bromell Tinubu

Primary
 General
 Other (specify) ▼

Mailing Address
1403 7th Ave

City State ZIP Code
Conway SC 29526-4219

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
26000.00 0.00 26000.00

TERMS

Date Incurred Date Due Interest Rate Secured:
06 / 11 / 2012 no due date none % (apr) Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)..... 26000.00
TOTALS This Period (last page in this line only).....

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : VNW1ECAQFK0L

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

Gloria Bromell Tinubu

Primary

General

Other (specify) ▼

Runoff

Mailing Address
1403 7th Ave

City State ZIP Code
Conway SC 29526-4219

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
7000.00 6700.00 300.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

06

26

2012

none

none

% (apr)

Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)..... 300.00

TOTALS This Period (last page in this line only).....

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)
LOANS**

NAME OF COMMITTEE (In Full) **Gloria Bromell Tinubu for Congress** Transaction ID : **VNW1ECAQFW1L**

LOAN SOURCE Full Name (Last, First, Middle Initial) Gloria Bromell Tinubu	[PERSONAL FUNDS]	Election: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff _____
Mailing Address 1403 7th Ave		

City	State	ZIP Code
Conway	SC	29526-4219

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
2500.00	2000.00	500.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 06 / D 30 / Y 2012	M M / D D / Y none	none % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional).....	500.00
TOTALS This Period (last page in this line only).....	

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Gloria Bromell Tinubu for Congress** Transaction ID : **VNW1ECAQFX9L**

LOAN SOURCE Full Name (Last, First, Middle Initial) Gloria Bromell Tinubu	[PERSONAL FUNDS]	Election: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff _____
Mailing Address 1403 7th Ave		

City	State	ZIP Code
Conway	SC	29526-4219

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
3500.00	2500.00	1000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 07 / D 10 / Y 2012	M M / D D / no due date	none % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional).....	1000.00
TOTALS This Period (last page in this line only).....	

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3) LOANS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : VNW1ECAQFV3L

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

Gloria Bromell Tinubu

Primary

General

Other (specify) ▼

Mailing Address
1403 7th Ave

City State ZIP Code
Conway SC 29526-4219

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
10000.00 1300.00 8700.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

08 / 06 / 2012

none

none % (apr)

Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)..... ▶ 8700.00

TOTALS This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : VNW1ECAQFZ4L

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

Gloria Bromell Tinubu

Primary

General

Other (specify) ▼

Mailing Address
1403 7th Ave

City State ZIP Code
Conway SC 29526-4219

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
5000.00 0.00 5000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

08

17

2012

none

none % (apr)

Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)..... 5000.00

TOTALS This Period (last page in this line only).....

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : VNW1ECAQFY7L

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

Gloria Bromell Tinubu

Primary

General

Other (specify) ▼

Mailing Address
1403 7th Ave

City State ZIP Code
Conway SC 29526-4219

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
1000.00 0.00 1000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

06 / 03 / 2013

none

none % (apr)

Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)..... 1000.00

TOTALS This Period (last page in this line only).....

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Gloria Bromell Tinubu for Congress** Transaction ID : **VNW1ECAQG02L**

LOAN SOURCE Full Name (Last, First, Middle Initial) Gloria Bromell Tinubu	[PERSONAL FUNDS]	Election: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 1403 7th Ave		

City	State	ZIP Code
Conway	SC	29526-4219

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
5000.00	0.00	5000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
08 / 20 / 2012	none	none % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....	5000.00
TOTALS This Period (last page in this line only).....	[]

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : VNW1ECAQG10L

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

Gloria Bromell Tinubu

Primary

General

Other (specify) ▼

Mailing Address

1403 7th Ave

City

State

ZIP Code

Conway

SC

29526-4219

Original Amount of Loan

2500.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

2500.00

TERMS

Date Incurred

M 12 / D 26 / Y 2012 Y

Date Due

M / D / Y no due date Y

Interest Rate

none % (apr)

Secured:

Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

SUBTOTALS This Period This Page (optional)..... ▶

2500.00

TOTALS This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : VNW1ECAQG28L

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

Gloria Bromell Tinubu

Primary

General

Other (specify) ▼

Mailing Address
1403 7th Ave

City State ZIP Code
Conway SC 29526-4219

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
500.00 0.00 500.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

06

28

2013

no due date

none

% (apr)

Yes

No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)..... 500.00

TOTALS This Period (last page in this line only).....

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) Transaction ID : VNW1ECAQG36L
Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial) Gloria Bromell Tinubu	[PERSONAL FUNDS]	Election: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 1403 7th Ave		

City	State	ZIP Code
Conway	SC	29526-4219

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
5000.00	0.00	5000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 10 / D 25 / Y 2012	M M / D D / Y none	none % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>

SUBTOTALS This Period This Page (optional).....	<input style="width: 100%;" type="text" value="5000.00"/>
TOTALS This Period (last page in this line only).....	<input style="width: 100%;" type="text"/>

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Gloria Bromell Tinubu for Congress** Transaction ID : **VNW1ECAQG44L**

LOAN SOURCE Full Name (Last, First, Middle Initial) **[PERSONAL FUNDS]** Gloria Bromell Tinubu
 Mailing Address 1403 7th Ave
 Election: 2012
 Primary
 General
 Other (specify) ▼

City State ZIP Code
 Conway SC 29526-4219

Original Amount of Loan 5000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 5000.00
------------------------------------	------------------------------------	--

TERMS
 Date Incurred: M 12 / D 26 / Y 2012
 Date Due: M / D / Y no due date
 Interest Rate: none % (apr)
 Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)..... ▶ 5000.00
TOTALS This Period (last page in this line only)..... ▶ []
 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : VNW1ECAQG60L

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

Gloria Bromell Tinubu

Primary

General

Other (specify) ▼

Mailing Address
1403 7th Ave

City State ZIP Code
Conway SC 29526-4219

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
15000.00 0.00 15000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M 11 / D 13 / Y 2012 Y

M M / D D / Y none Y Y

none % (apr)

Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)..... ▶ 15000.00
TOTALS This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : VNW1ECAQG86L

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

Gloria Bromell Tinubu

Primary

General

Other (specify) ▼

Mailing Address
1403 7th Ave

City State ZIP Code
Conway SC 29526-4219

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
3000.00 0.00 3000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

09 / 19 / 2012

no due date

none % (apr)

Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)..... 3000.00
TOTALS This Period (last page in this line only).....

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : VNW1ECAQG93L

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

Gloria Bromell Tinubu

Primary

General

Other (specify) ▼

Mailing Address

1403 7th Ave

City

State

ZIP Code

Conway

SC

29526-4219

Original Amount of Loan

200.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

200.00

TERMS

Date Incurred

M 07 / D 01 / Y 2013 Y

Date Due

M M / D D / Y no due date Y

Interest Rate

none % (apr)

Secured:

Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount Guaranteed Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount Guaranteed Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount Guaranteed Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)..... ▶

200.00

TOTALS This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : VNW1ECAQGA1L

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

Gloria Bromell Tinubu

Primary

General

Other (specify) ▼

Mailing Address

1403 7th Ave

City

State

ZIP Code

Conway

SC

29526-4219

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

1000.00

0.00

1000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M 12 / D 31 / Y 2012

M / D / Y none

none % (apr)

Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

SUBTOTALS This Period This Page (optional)..... ▶

1000.00

TOTALS This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : VNW1ECAQGB9L

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

Gloria Bromell Tinubu

Primary

General

Other (specify) ▼

Mailing Address
1403 7th Ave

City State ZIP Code
Conway SC 29526-4219

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
10000.00 0.00 10000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M 11 M

D 01 D

Y 2012 Y

M M

D D

Y none Y

none % (apr)

Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)..... 10000.00

TOTALS This Period (last page in this line only).....

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : VNW1ECAQG7L

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

Gloria Bromell Tinubu

Primary

General

Other (specify) ▼

Mailing Address
1403 7th Ave

City State ZIP Code
Conway SC 29526-4219

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
10000.00 0.00 10000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

08 / 20 / 2012

/ / none

none % (apr)

Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)..... 10000.00

TOTALS This Period (last page in this line only).....

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : VNW1ECAQGE3L

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

Gloria Bromell Tinubu

Primary

General

Other (specify) ▼

Mailing Address

1403 7th Ave

City

State

ZIP Code

Conway

SC

29526-4219

Original Amount of Loan

1500.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

1500.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
09 / 30 / 2013

Date Due

M M / D D / Y Y Y Y
none

Interest Rate

none % (apr)

Secured:

Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

SUBTOTALS This Period This Page (optional)..... ▶

1500.00

TOTALS This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

13a
 13b

NAME OF COMMITTEE (In Full) **Gloria Bromell Tinubu for Congress** Transaction ID : **VNW1ECAQGG9L**

LOAN SOURCE Full Name (Last, First, Middle Initial) Gloria Bromell Tinubu	[PERSONAL FUNDS]	Election: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 1403 7th Ave		

City	State	ZIP Code
Conway	SC	29526-4219

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
3500.00	0.00	3500.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 07 / D 09 / Y 2013	M M / D D / Y none	none % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....	▶	3500.00
TOTALS This Period (last page in this line only).....	▶	[]

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : VNW1ECAQGH7L

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2014

Gloria Bromell Tinubu

Primary
 General
 Other (specify) ▼

Mailing Address
1403 7th Ave

City State ZIP Code
Conway SC 29526-4219

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
10000.00 0.00 10000.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 02 / D 13 / Y 2014 M M / D D / Y nonr none % (apr) Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)..... 10000.00

TOTALS This Period (last page in this line only).....

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Gloria Bromell Tinubu for Congress** Transaction ID : **VNW1ECAQ GK2L**

LOAN SOURCE Full Name (Last, First, Middle Initial) **[PERSONAL FUNDS]** Gloria Bromell Tinubu
 Election: 2014
 Primary
 General
 Other (specify) ▼

Mailing Address
 1403 7th Ave
 City State ZIP Code
 Conway SC 29526-4219

Original Amount of Loan 1350.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 1350.00
------------------------------------	------------------------------------	--

TERMS
 Date Incurred: M 05 / D 09 / Y 2014
 Date Due: M / D / Y none
 Interest Rate: none % (apr)
 Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)..... ▶ 1350.00
TOTALS This Period (last page in this line only)..... ▶ []
 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : VNW1ECAQGN8L

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

Gloria Bromell Tinubu

Primary

General

Other (specify) ▼

Mailing Address
1403 7th Ave

City State ZIP Code
Conway SC 29526-4219

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
700.00 0.00 700.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M 11 M /

D 15 D /

Y 2013 Y Y

M M /

D D /

Y none Y Y Y

none % (apr)

Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)..... ▶ 700.00

TOTALS This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : VNW1ECB2ZK1L

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2014

Gloria Bromell Tinubu

Primary

General

Other (specify) ▼

Mailing Address
1403 7th Ave

City State ZIP Code
Conway SC 29526-4219

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
1500.00 0.00 1500.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M 07 M

D 15 D

Y 2014 Y

M M

D D

Y none Y

none % (apr)

Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)..... 1500.00
TOTALS This Period (last page in this line only).....

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : VNW1ECB2Z7L

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2014

Gloria Bromell Tinubu

Primary

General

Other (specify) ▼

Mailing Address
1403 7th Ave

City State ZIP Code
Conway SC 29526-4219

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
1800.00 0.00 1800.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M 07 M

D 23 D

Y 2014 Y

M M

D D

Y none Y

none % (apr)

Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)..... 1800.00

TOTALS This Period (last page in this line only).....

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Gloria Bromell Tinubu for Congress** Transaction ID : **VNW1ECRDBQ2L**

LOAN SOURCE Full Name (Last, First, Middle Initial) Gloria Bromell Tinubu	[PERSONAL FUNDS]	Election: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 1403 7th Ave		

City	State	ZIP Code
Conway	SC	29526-4219

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
3000.00	0.00	3000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 08 / D 15 / Y 2014 Y	M M / D D / Y none Y Y	none % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....	▶	3000.00
TOTALS This Period (last page in this line only).....	▶	[]

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)
LOANS**

NAME OF COMMITTEE (In Full) Transaction ID : VNW1ECZ6ZM2L
Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial) Gloria Bromell Tinubu	[PERSONAL FUNDS]	Election: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 1403 7th Ave		

City	State	ZIP Code
Conway	SC	29526-4219

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
6500.00	0.00	6500.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 09 / D 21 / Y 2014 Y	M M / D D / Y Y Y Y Y	none % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional).....	6500.00
TOTALS This Period (last page in this line only).....	

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)
LOANS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : VNW1ED3WER9L

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

Gloria Bromell Tinubu

Primary

General

Other (specify) ▼

Mailing Address
1403 7th Ave

City State ZIP Code
Conway SC 29526-4219

Original Amount of Loan 500.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 500.00
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TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M / D D / Y Y Y Y
09 / 21 / 2014

M M / D D / Y Y Y Y
none

none % (apr)

Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....	500.00
TOTALS This Period (last page in this line only).....	352050.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 118 OF 120
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

Gloria Bromell Tinubu for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Lake Research Partners Inc		Nature of Debt (Purpose): polling and survey services
Mailing Address 1726 M St NW Ste 1100		
City State	Zip Code	
Washington DC	20036-4528	

Outstanding Balance Beginning This Period	Transaction ID : VNS3P9H64F1	
<input type="text" value="6500.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="6500.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mad Dog Mail Inc		Nature of Debt (Purpose): campaign mailing/advertisement
Mailing Address 5542 First Coast Hwy Ste 300		
City State	Zip Code	
Fernandina Beach FL	32034-5088	

Outstanding Balance Beginning This Period	Transaction ID : VNS3P9H64K3	
<input type="text" value="500.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="500.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Reginald Poplus		Nature of Debt (Purpose): Consulting Services - management
Mailing Address 2475 Enon Rd SW		
City State	Zip Code	
Atlanta GA	30331-7843	

Outstanding Balance Beginning This Period	Transaction ID : VNS3P9H64P7	
<input type="text" value="4191.66"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="4191.66"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="11191.66"/>
2) TOTALS This Period (last page this line number only)	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)

Gloria Bromell Tinubu for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor James E. Smith Jr., Esq.		Nature of Debt (Purpose): legal services
Mailing Address 1718 Hollywood Dr		
City	State	Zip Code
Columbia	SC	29205-3216

Outstanding Balance Beginning This Period	Transaction ID : VNS3P9H6589	
<input type="text" value="600.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="600.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Taylor Collective Solutions		Nature of Debt (Purpose): campaign consulting - fundraising
Mailing Address 1524 S Interstate 35 Ste 200		
City	State	Zip Code
Austin	TX	78704-8931

Outstanding Balance Beginning This Period	Transaction ID : VNS3P9H63K3	
<input type="text" value="1250.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="1250.00"/>	<input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor The Oblander Group LLC		Nature of Debt (Purpose): consulting services-fundraising
Mailing Address 1100 Spring St NW Ste 360		
City	State	Zip Code
Atlanta	GA	30309-2825

Outstanding Balance Beginning This Period	Transaction ID : VNS3P9H64A2	
<input type="text" value="900.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="900.00"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="1500.00"/>
2) TOTALS This Period (last page this line number only)	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)

Gloria Bromell Tinubu for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Woodfield Group Inc.		Nature of Debt (Purpose): campaign finance consulting
Mailing Address 1118 Old Breckenridge Ln		
City State Zip Code Montgomery AL 36117-8961		

Outstanding Balance Beginning This Period 2400.00		Transaction ID : VNS3P9H64G9	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2400.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City State Zip Code		

Outstanding Balance Beginning This Period		Outstanding Balance at Close of This Period	
Amount Incurred This Period	Payment This Period		

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City State Zip Code		

Outstanding Balance Beginning This Period		Outstanding Balance at Close of This Period	
Amount Incurred This Period	Payment This Period		

1) SUBTOTALS This Period This Page (optional)	2400.00
2) TOTALS This Period (last page this line number only)	15091.66
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	15091.66